<u> </u>					Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD 10768976 Effective October 1, 2003										
CLAMS AS FILED - PART I					MALLENTTY PE COR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS 109			. •		RATE	FEE		RATE	FEE	
	MINIBER FOLE	D NUTURE	RECTRA	84	SIC FEE	385.00	OR		770.00	
FOR TOTAL CHARGEABLE CLAIMS	14.73 minus		· 123		X\$ 9=		OR	C\$18= 18	214	
	13 minus	1. 10			X43=		OR	X86=	860	
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM P	15				145=		OR -	290=	290	
	anter TC in Co	eturno 2		TOTAL			TOTAL	姬		
• If the difference in column 1 is less than zero, once of the difference in column 1 is less than zero, once THAN										
CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY									ADDI-	
(Column 1) COLUMN REMARKING AFTER		HIGHEST HUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Minus	PAID FOR		1 [	X\$ 9=		OR	X\$18=	0	
Total 1/3	Minus	··· 1 3	•	1 t	X43-		OR	X88=	0	
Independent • /3	ULTIPLE DEPE	NOENT CLAIM		] <b> </b>	+145•		OR	+290=		
	:	•		L	YOTAL			TOTAL DOCK FEE	0	
100/4		•			DOIT, FEE!					
1/27/06 (Cotumn 1)		(Column 2)	(Cotumn S	'nΓ		ADDI-	1. [		ADDI- TIONAL	
ID REMANDING		NUMBER PRÉVIOUSLY	PRESENT	11	RATE	TIONAL	ľ	RATE	FEE	
Total • /25	Minus	PAID FOR	-0	11	X\$ 9=	·	OR	X\$18-		
Total • //	Minus	-13	.0	]	X43=		OR	XB6=	<u>.                                    </u>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				┛╽	+145=		OR	+290=		
				ł	TOTAL	<del> </del>	OR	ADDIT, FE		
-1./~					ADDIT, FEE				•	
CLAUS	)	(Column 2)	(Column	7 1		T ADDI-	7		ADDI-	
REMAININ	<b>3</b>	NUMBER PREVIOUSLY	PRESENT		RATE	TIONA	-	RATE.	TIONAL	
IIZ AMENDACE		PAID FOR	1	۱ ۲	X\$ 9=	1	OR	X\$18=	· <u>l</u>	
Total • 44	Minus	989		<b>-</b>	X43=	1	Oia	Voe		
PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1-	7			
					+145=	<del> </del>		101	<u> </u>	
· If the entry in column 1 is less than the course of column than 20, enter *0. ADDIT. FEE										
** If the "Alghest Number Previously Paid For" IN THIS SPACE is less than 0, enter "3."  "If the "Alghest Number Previously Paid For" IN THIS SPACE is less than 0, enter "3."  "If the "Alghest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1  The "Represt Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1  The "Represt Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1										
•		·				Cared City	0.08.0	EWITHEN	4 m	